Change of Address Form Questions: Call (775) 687-0700 Email completed form to captives@doi.nv.gov					
Nevada ID Number	Company Name				
FEIN Number	Contact Name / Title				
Company Web Address	Company Phone Number Company			mail	
Please check the box for the entity type Captive Captive Registered Captive CPA Other Agent Actuary					
Current Address					
Street Address		City		State	Zip
- Change to -					
New Address					
Street Address		City		State	Zip
Must be signed by an Authorized Representative					
Name/Title of Principal Officer	☐ I attest that this is my electronic signature ☐ Date of Signature				
Signature					

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